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COMMONWEALTH OF KENTUCKY  
TREY GRAYSON, SECRETARY OF STATE  
SIXTY (60) DAY NOTICE AND ANNUAL REPORT  
SEPTEMBER 1, 2005  
MUST BE RECEIVED BY OCTOBER 31, 2005



0534386

ORGANIZATION ID #  
0534386

STATE OR COUNTRY  
OF INCORPORATION

KY

ORGANIZATION  
DATE

04/04/2002

FILING  
FEE

\$4.00

(1) CURRENT REGISTERED AGENT AND REGISTERED OFFICE ADDRESS

Changes made to the registered agent or registered office cannot be made on this form.  
Complete (3) to request a form to be mailed or download form from web site.

DAVID L HOLTON II  
12004 HILDA COURT  
LOUISVILLE, KY 40272

(3) MAIL A STATEMENT OF CHANGE OF AGENT OR OFFICE TO

RECEIVED

SEP 13 2005

SECRETARY OF STATE  
COMMONWEALTH OF KY

(2) EXACT CORPORATE NAME AND CURRENT PRINCIPAL OFFICE ADDRESS

PRAIRIE VILLAGE BASEBALL-SOFTBALL INCORPORATED  
9733 OLD THIRD STREET ROAD  
LOUISVILLE, KY 40272

(4) THE PRINCIPAL OFFICE ADDRESS IS HEREBY CHANGED TO

(5) PRINCIPAL OFFICERS If the corporation has previously filed an annual report, verify the names and titles of officers listed below. Please note any additions to or changes in the principal officers and give the business address for each person listed. If (5) is blank, type or print the names and business addresses of the current principal officers. If sole officer, please note. The annual report will be returned if business addresses are not listed.

President	Mike Carden	12004 HILDA CT. Louisville, KY 40272
Vice President	Scott Moore	1919 FLORENCE DR. Lou. KY 40272
Secretary	Cindy Jessee	1407 GARVEY DR. Lou. KY 40216
Treasurer	Tammy Maynard	4513 SOUTHWICK DR. Lou. KY 40272

(6) DIRECTORS Type or print the names and business addresses of the corporation's directors. No listing of directors is verification that the corporation has dispensed with directors (KRS 271B.8-010(3)). Nonprofit corporations must list three (3) or more directors (KRS 273.211). The annual report will be returned if business addresses are not listed.

Name	Mike Carden	12004 HILDA CT Louisville, KY 40272
Name	Scott Moore	1919 FLORENCE DR. Lou. KY 40272
Name	Tammy Maynard	4513 SOUTHWICK DR. Lou. KY 40272
Name		
Name		

(7) Check here if you are a cooperative corporation ☐

I VERIFY THAT THE INFORMATION IN THIS ANNUAL REPORT IS CURRENT AS OF THE DATE THIS REPORT IS EXECUTED.

Signature of Officer or Chairman of the Board

TITLE

PRESIDENT

DATED

9-2-05

ANNUAL REPORT AND FILING FEE

Submit for filing the completed annual report form and correct filing fee as indicated above. Make check payable to the "Kentucky State Treasurer". Please do not send cash.

MAILING ADDRESS

Trey Grayson  
Secretary of State  
P O Box 1150  
Frankfort, KY 40602-1150

OFFICE LOCATION

Secretary of State  
State Capitol, Room 154  
700 Capital Avenue  
Frankfort, KY 40601  
(502)-564-2848

NOTE: P O Box 1150 is for  
annual report filings only.